### Case 17-15265 Doc 1 Filed 05/16/17 Entered 05/16/17 17:10:48 Desc Main Document Page 1 of 41

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Part 1: Identify Yourself							
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Richard First name  Stephen Middle name  Royce Last name and Suffix (Sr., Jr., II, III)	Susan First name Charlene Middle name Royce Last name and Suffix (Sr., Jr., II, III)					
2.	All other names you have used in the last 8 years Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8344		xxx-xx-7787				

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Debtor 1 Richard Stephen Royce Susan Charlene Royce

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)			
		EINS	EINs			
5.	Where you live	3N226 Loblolly Lane Saint Charles, IL 60175	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kane County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  □ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 17-15265 Doc 1 Filed 05/16/17 Entered 05/16/17 17:10:48 Desc Main Page 3 of 41 Document **Richard Stephen Royce** Debtor 1 Debtor 2 Susan Charlene Royce Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District

## 11. Do you rent your residence?

■ No.

Go to line 12.

Debtor

District

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

When

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Relationship to you

Case number, if known

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Deb	otor 2 Susan Charlene R	loyce			Case number (if known)			
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Chec	Check the appropriate box to describe your business:				
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))			
				•	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you ir is, cash-fl	dicate that you are ow statement, and t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am r	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety?							
	Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
	<u> </u>				Number, Street, City, State & Zip Code			

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Debtor 1 Richard Stephen Royce
Debtor 2 Susan Charlene Royce

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-15265 Doc 1 Filed 05/16/17 Entered 05/16/17 17:10:48 Desc Main Document Page 6 of 41

	tor 2 Susan Charlene R				Case number	(if known)				
Par	6: Answer These Quest	ions for R	Reporting Purposes							
	What kind of debts do you have?	16a.	Are your debts primarily condition individual primarily for a pers			ned in 11 U.S.C. § 101(8) as "incurred by an				
			□ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you o	owe that are not consur	mer debts or business	s debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	r 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. I are paid that funds will be av			erty is excluded and administrative expenses				
	administrative expenses are paid that funds will		■ No							
	be available for distribution to unsecured creditors?		Yes	s						
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000				
	you estimate that you owe?	□ 50-99	)	☐ 5001-10,000		<b>5</b> 0,001-100,000				
		□ 100-1 □ 200-9		☐ 10,001-25,0	00	☐ More than100,000				
19.	How much do you estimate your assets to	□ \$0 - S	•	□ \$1,000,001		□ \$500,000,001 - \$1 billion				
	be worth?		001 - \$100,000 ,001 - \$500,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
			,001 - \$300,000 ,001 - \$1 million		01 - \$500 million	☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	. ,	001 - \$100,000	☐ \$10,000,001		□ \$1,000,000,001 - \$10 billion				
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
		<b>—</b> \$500			, , , , , , , , , , , , , , , , , , ,					
Par	7: Sign Below									
For	you	I have e	xamined this petition, and I dec	clare under penalty of p	perjury that the inform	nation provided is true and correct.				
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.				
			to attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this cument, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I reques	t relief in accordance with the	chapter of title 11, Unite	ed States Code, spec	sified in this petition.				
			tcy case can result in fines up			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,				
			d Stephen Royce re of Debtor 1		Susan Charlene Signature of Debtor					
		Execute	d on May 16, 2017 MM / DD / YYYY			<b>/ 16, 2017</b> / DD / YYYY				

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Debtor 1 Debtor 2	Richard Stephen Susan Charlene R	•	Page 7 of 41  Cas	e number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unifor which the person is eligible. I also certify	ted States Code, and have e	explained the relief a	vailable under each chapter
•	not represented by ey, you do not need page.	and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.			ry that the information in the
		Signature of Attorney for Debtor	Date	May 16, 2017 MM / DD / YYYY	
		John S. Biallas Printed name			
		John S. Biallas, Attorney At Law			
		3N918 Sunrise lane St. Charles, IL 60174  Number, Street, City, State & ZIP Code			

jsb70@comcast.net

Email address

Contact phone **630-513-7878** 

**00203890**Bar number & State

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	Docum	ent Page 8 of 4	.1		
mation to identify your	case:				
Richard Stephen	Richard Stephen Royce				
First Name	Middle Name	Last Name			
Susan Charlene F	Royce				
First Name	Middle Name	Last Name			
ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS				
				☐ Check if this is an amended filing	
	Richard Stephen First Name Susan Charlene First Name	Richard Stephen Royce First Name Middle Name  Susan Charlene Royce First Name Middle Name	Richard Stephen Royce First Name Middle Name Last Name  Susan Charlene Royce First Name Middle Name Last Name	Richard Stephen Royce First Name Middle Name Last Name  Susan Charlene Royce First Name Middle Name Last Name	

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	357,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,700.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	361,700.00
Ра	rt 2: Summarize Your Liabilities		
			abilities it you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	475,744.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	4,709.87
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	385,991.44
	Your total liabilities	\$	866,445.31
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,265.40
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,229.00
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	hedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Richard Stephen Royce
Debtor 2 Susan Charlene Royce

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,508.60

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	4,709.87
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	358,191.44
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	 	362,901.31

	Cas	e 17-1526	5 Doc 1		05/16/17 ument	Entered 05/16/17	7 17:10:48	Desc	Main
Fill	in this informa	tion to identify	your case and t			F AUE 10 01 41			
Deb	otor 1	Richard Ste	phen Royce	dle Name		Last Name			
	otor 2 use, if filing)	Susan Char First Name		dle Name		Last Name			
Uni	ted States Bank	ruptcy Court fo	r the: NORTHE	RN DISTE	RICT OF ILLIN	NOIS			
Cas	se number					-			Check if this is an amended filing
_	ficial Forr	_	_						
<u>Sc</u>	<u>chedule</u>	<u> A/B: P</u>	roperty						12/15
nfor	mation. If more s wer every questio	pace is needed, on.	attach a separate	sheet to th	is form. On the	e are filing together, both are e e top of any additional pages, on or Have an Interest In			
. D	o you own or hav	e any legal or e	quitable interest in	any reside	ence, building,	land, or similar property?			
	No. Go to Part 2	<u>.</u>							
	Yes. Where is the	ne property?							
1.1	2N226 Lable	ally Long		What	is the property	? Check all that apply			
3N226 Lobiolly Lane Street address, if available, or other description			Duplex or multi-unit building			Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
	Saint Charle	es IL	60175-0000 ZIP Code		Manufactured Land Investment pro	or mobile home	Current value of entire property?	p	Surrent value of the ortion you own?
	,				Timeshare Other		Describe the natu	ure of your	ownership interest y by the entireties, or
					nas an interest Debtor 1 only	in the property? Check one	a life estate), if ki		eties
	Kane				Debtor 2 only				
	County				Debtor 1 and I	Debtor 2 only	Check if this		nity property
				Other		ou wish to add about this item	•	•	
2	A -l -l 4bl - ll					nama Dant 4. imalaadinan amaa			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$357,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

		C	Case 17-1	5265	Doc 1	Filed 05/16/17 Document	Entered 05/16 Page 11 of 41	6/17 17:10:48	Desc Main
	ebtor 1 ebtor 2		ichard Stepl usan Charle				_	ase number (if known)	
3.	Cars, v	vans,	trucks, tracto	rs, sport	utility vehi	cles, motorcycles			
ı	□No								
_	■ Yes								
	- 163								
3	.1 Ma	ake:	Hundai			Who has an interest in the	property? Check one		ured claims or exemptions. Put
Ū		odel:	Santa Fe			Debtor 1 only	property: Official office		secured claims on Schedule D: re Claims Secured by Property.
		ar:	2007			Debtor 2 only			
	Ap	proxin	nate mileage:	100	+ 000	■ Debtor 1 and Debtor 2 o	only	Current value of the entire property?	he Current value of the portion you own?
	-	-	ormation:			☐ At least one of the debto	=	,	. ,
	Lo	catio	on: 3N226 Lo	oblolly L	ane,			<b>.</b>	
	Sa	int C	harles IL 60	175		Check if this is commu	unity property	\$2,500	.00 \$2,500.00
						(see instructions)			
						for all of your entries fr			<b>\$2.500.00</b>
	.pages	you	have attached	d for Part	2. Write th	at number here		=>	\$2,500.00
Da	rt 2.	)osoril	oe Your Person	aland Ho	usahald Itan	ne.			
						rest in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	House Exam □ No	hold ples: I	<b>goods and fu</b> Major applianc	rnishings es, furnitu	re, linens, c	china, kitchenware			
	■ Yes	s. De	scribe						
						ure and misc. househ Loblolly Lane, Saint (			\$1,000.00
	■ No	ples: ¯	Televisions and			, stereo, and digital equip dia players, games	oment; computers, printe	ers, scanners; music co	ollections; electronic devices
8.		ples: i	s of value Antiques and fi other collection				oks, pictures, or other ar	rt objects; stamp, coin,	or baseball card collections;
		s. De	scribe						
9.		ples: \$	for sports and Sports, photog musical instrur	raphic, ex		other hobby equipment; I	bicycles, pool tables, go	olf clubs, skis; canoes a	and kayaks; carpentry tools;
	_	s. De	scribe						
10.	Firea Exar ■ No		Pistols, rifles,	shotguns	, ammunitio	n, and related equipment			
		s. De	scribe						

Official Form 106A/B Schedule A/B: Property page 2

Debto	or 1 Richard Ste	ephen Royce	ocument	Page 12 of 41		
Debto		rlene Royce			Case number (if known	
	lothes Examples: Everyday o No Yes. Describe	clothes, furs, leather coats, desi	gner wear, shoes,	accessories		
		clothing of an adult ma Location: 3N226 Loblol		Charles IL 60175		\$200.00
	ewelry Examples: Everyday j No Yes. Describe	ewelry, costume jewelry, engag	ement rings, wedd	ling rings, heirloom jew	velry, watches, gems,	gold, silver
		wedding rings male and Location: 3N226 Loblol	d female ly Lane, Saint C	Charles IL 60175		\$500.00
E	on-farm animals Examples: Dogs, cats No Yes. Describe	s, birds, horses				
=	ny other personal a No Yes. Give specific ir	nd household items you did r	not already list, in	cluding any health ai	ids you did not list	
		e of all of your entries from Pa t number here			ou have attached	\$1,700.00
Part 4	Describe Your Fina	ncial Assets				
Do yo	ou own or have any	legal or equitable interest in	any of the followi	ng?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	xamples: Money you No	ı have in your wallet, in your hor	•	sit box, and on hand w	hen you file your peti	tion
Ε	institutions	savings, or other financial accords. If you have multiple accounts			dit unions, brokerage	houses, and other similar
_	No Yes		Institution na	ame:		
		17.1. <b>checking</b>	Chase Bar	nk, St. Charles,join	t checking	\$500.00
_E	xamples: Bond fund	s, or publicly traded stocks s, investment accounts with bro	kerage firms, mone	ey market accounts		
	No Yes	Institution or issuer n	name:			
jo	on-publicly traded soint venture No	stock and interests in incorpo	orated and uninco	rporated businesses	, including an intere	st in an LLC, partnership, and
_		nformation about them Name of entity:			% of ownership:	

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Official Form 106A/B Schedule A/B: Property page 3

Entered 05/16/17 17:10:48 Case 17-15265 Doc 1 Filed 05/16/17 Desc Main Page 13 of 41 Document **Richard Stephen Royce** Debtor 1 Debtor 2 Susan Charlene Royce Case number (if known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Pension** Fidelity Pension, Debtor Unknown **Pension** Illiniois Teachers' Retirement Fund, codebtor Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information.....

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Debtor 1 Debtor 2				Case number (if known)		
Exa ■ No	<ul> <li>Other amounts someone owes you         Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else     </li> <li>No</li> <li>□ Yes. Give specific information</li> </ul>					
Exa	<ul> <li>31. Interests in insurance policies         Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance     </li> <li>No</li> </ul>					
	s. Name the insurance com	pany of each pompany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:	
If you som	eone has died.	ing trust, expec		ed surance policy, or are currently entitled to rec	eive property because	
Exa ■ No	33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  ■ No □ Yes. Describe each claim					
■ No	34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  ■ No  □ Yes. Describe each claim					
■ No	financial assets you did n					
		•	•	ny entries for pages you have attached	\$500.00	
Part 5:	Describe Any Business-Relat	ed Property You	Own or Have an Interest	In. List any real estate in Part 1.		
■ No.	37. Do you own or have any legal or equitable interest in any business-related property?  ■ No. Go to Part 6.  □ Yes. Go to line 38.					
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.						
■ N	ou own or have any legal to. Go to Part 7.	or equitable in	terest in any farm- or o	commercial fishing-related property?		
	<u></u>					
Part 7:	Describe All Property Yo	u Own or Have a	n Interest in That You Did	d Not List Above		
	ou have other property of mples: Season tickets, cour					

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

☐ Yes. Give specific information.......

\$0.00

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**Richard Stephen Royce** Debtor 1 Debtor 2 Susan Charlene Royce Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ......

\$357,000.00 Part 2: Total vehicles, line 5 56. \$2,500.00 Part 3: Total personal and household items, line 15 \$1,700.00 Part 4: Total financial assets, line 36 58. \$500.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$4,700.00

\$4,700.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$361,700.00

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		17(1(.1111)	111 FAUE 10 0141	
Fill in this infor	mation to identify your	case:		
Debtor 1	Richard Stephen	Royce		
	First Name	Middle Name	Last Name	
Debtor 2	Susan Charlene I	Royce		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				
				l a

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exem	pt
---	----

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	☐ You are claiming federal exemptions. 11 t	11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	3N226 Loblolly Lane Saint Charles, IL	\$357,000.00		\$243,462.00	735 ILCS 5/12-112			
	60175 Kane County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	3N226 Loblolly Lane Saint Charles, IL	\$357,000.00		\$30,000.00	735 ILCS 5/12-901			
	60175 Kane County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	2007 Hundai Santa Fe 100,000 + miles	\$2,500.00		\$2,500.00	735 ILCS 5/12-1001(c)			
	Location: 3N226 Loblolly Lane, Saint Charles IL 60175 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	6 rooms of furniture and misc. household goods.	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)			
	Location: 3N226 Loblolly Lane, Saint Charles IL 60175 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	clothing of an adult male and female	\$200.00		\$200.00	735 ILCS 5/12-1001(a)			
	Location: 3N226 Loblolly Lane, Saint Charles IL 60175			100% of fair market value, up to				

any applicable statutory limit

Line from Schedule A/B: 11.1

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Richard Stephen Royce

Susan Charlene Royce Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B wedding rings male and female 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Location: 3N226 Loblolly Lane, Saint 100% of fair market value, up to Charles IL 60175 Line from Schedule A/B: 12.1 any applicable statutory limit checking: Chase Bank, St. 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Charles, joint checking Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Pension: Fidelity Pension, Debtor 735 ILCS 5/12-1006 \$0.00 Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Pension: Illiniois Teachers'** 735 ILCS 5/12-1006 \$0.00 Unknown Retirement Fund, codebtor Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Debtor 1

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		Document	Page 18	3 of 41		
Fill in this informa	ation to identify you	r case:				
Debtor 1	Richard Stepher	Royce				
200101	First Name	Middle Name	Last Name			
Debtor 2	Susan Charlene	Royce				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	cruptcy Court for the:	NORTHERN DISTRICT OF ILLII	NOIS			
Case number						
(if known)					☐ Check	if this is an
					_	led filing
						ū
Official Form	106D					
Schedule [	D: Creditors	Who Have Claims S	ecure	d by Propert	y	12/15
Be as complete and a	accurate as possible. I	f two married people are filing together	. both are e	qually responsible for su	polying correct informa	tion. If more space
		out, number the entries, and attach it to				
1. Do any creditors h	ave claims secured by	your property?				
□ No. Check t	his box and submit th	nis form to the court with your other s	chedules. Y	ou have nothing else t	o report on this form.	
		·	onoddioo. 1	ou navo nou iing oloo t		
	all of the information b	pelow.				
Part 1: List All	Secured Claims			O-1 A	Onlyman D	0-1
		nore than one secured claim, list the credi			Column B	Column C
		s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured portion
		•		value of collateral.	claim	if any
2.1 Bank of Am Creditor's Name	nerica	Describe the property that secures th		\$76,538.00	\$357,000.00	\$76,538.00
Creditor's Name		3N226 Loblolly Lane Saint Ch IL 60175 Kane County	arles,			
DO DOV 24	705	As of the date you file, the claim is: C	neck all that			
PO BOX 31 Tampa, FL		apply.				
		Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
Who owes the deb	t? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as m	ortgage or se	cured		
Debtor 2 only		car loan)	origago or oo	04.04		
■ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
☐ At least one of the	•	☐ Judgment lien from a lawsuit	,			
☐ Check if this clai		•	lunior Mo	rtgage		
community debt						
Date debt was incur	red	Last 4 digits of account number	er			
2.2 BMO Harris	5	Describe the property that secures th	e claim:	\$30,000.00	\$357,000.00	\$30,000.00
Creditor's Name		3N226 Loblolly Lane Saint Ch	arles,			
		IL 60175 Kane County				
		As of the date you file, the claim is: C	neck all that			
		apply.	TOOK all triat			
		Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
Who owes the deb	t? Check one	☐ Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	er oncor onc.	☐ An agreement you made (such as m	ortagae or se	cured		
Debtor 2 only		car loan)	origage or se	culeu		
_	Debtor 1 and Debtor 2 only  Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the	-	☐ Judgment lien from a lawsuit	- ,			
☐ Check if this clai			lunior Mo	rtgage		
community debt		— Julier (including a right to offset)		<u> </u>		
Date debt was incur	red	Last 4 digits of account number	er			

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Debtor 1		Richard Stephen Royce			Case number (if know)			
		First Name	Middle Nan	ne Last Name				
Deb	tor 2	Susan Charlene	Royce					
		First Name	Middle Nan	ne Last Name				
2.3	Nat	ionstar Mortgage	•	Describe the property that secures	s the claim:	\$369,206.00	\$357,000.00	\$12,206.00
	Credi	itor's Name		3N226 Loblolly Lane Saint IL 60175 Kane County	Charles,			
		60 Cypress Water opell, TX 75019	SBI	As of the date you file, the claim is apply.  Contingent	S: Check all that			
	Numl	per, Street, City, State & Zip		Unliquidated				
Who	owe	s the debt? Check on		☐ Disputed  Nature of lien. Check all that apply				
_		1 only 2 only		An agreement you made (such as car loan)	s mortgage or s	ecured		
	Debtor	1 and Debtor 2 only		☐ Statutory lien (such as tax lien, m	echanic's lien)			
	t leas	t one of the debtors and	d another	☐ Judgment lien from a lawsuit				
		if this claim relates to unity debt	а	Other (including a right to offset)	Mortgage			
Date	debt	was incurred		Last 4 digits of account nu	mber			
Ad	ld the	dollar value of your e	ntries in Co	lumn A on this page. Write that nu	mber here:	\$475,744	.00	
		the last page of your	form, add th	ne dollar value totals from all page	s.	\$475,744	.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Page 20 of 41 Document Fill in this information to identify your case: Debtor 1 Richard Stephen Royce Middle Name Last Name Debtor 2 Susan Charlene Rovce Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 **Internal Revenue Service** Last 4 digits of account number \$2,416,70 \$2,416.70 \$0.00 Priority Creditor's Name PO BOX 7346 When was the debt incurred? 4/2015 Philadelphia, PA 19101-7346 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only □ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes Personal 1040 2014 2.2 **Internal Revenue Service** Last 4 digits of account number \$2,293.17 \$2,293.17 \$0.00 Priority Creditor's Name **PO BOX 7346** 4/2016 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ■ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? Claims for death or personal injury while you were intoxicated ■ No Other. Specify

Official Form 106 E/F

☐ Yes

Personal 1040 2015

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Debtor	Richard Stephen Royce Susan Charlene Royce	Case number (if know)			
Part 2:	List All of Your NONPRIORITY Unsecu	red Claims			
3. Do	any creditors have nonpriority unsecured claim	s against you?			
	No. You have nothing to report in this part. Submit t	his form to the court with your other schedules.			
	<b>5</b>	,			
	Yes.				
uns tha	secured claim, list the creditor separately for each claim	alphabetical order of the creditor who holds each claim. If a creditor has more the aim. For each claim listed, identify what type of claim it is. Do not list claims already inccreditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more		
			Total claim		
1.1	Amex	Last 4 digits of account number	\$4,000.00		
	Nonpriority Creditor's Name		Ψ+,000.00		
	Po Box 297871	When was the debt incurred?	_		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply			
	Debtor 1 only	Пол			
	Debtor 2 only	☐ Contingent			
	_	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit card purchases	_		
1.2	AT&T Universal Card	Last 4 digits of account number	\$2,200.00		
	Nonpriority Creditor's Name PO BOX 6500	When was the debt incurred?			
	Sioux Falls, SD 57117		_		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	LI Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit card purchases			

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	1 Richard Stephen Royce 2 Susan Charlene Royce	Case number (if know)	
4.3	Discover Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$11,500.00
	c/o Blitt and Gaines PC 661 Glenn Ave. Wheeling, IL 60090 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.4	Discover Card Nonpriority Creditor's Name	Last 4 digits of account number	\$6,500.00
	PO Box 6103 Carol Stream, IL 60197-6103	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.5	Dryer Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	PO BOX 2091 Aurora, IL 60507	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	

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Debtor 1 Richard Stephen Royce

Debtor 2 Susan Charlene Royce		Case number (if know)					
4.6	Lowes	Last 4 digits of account number	\$2,500.00				
	Nonpriority Creditor's Name PO BOX 530970 Atlanta, GA 30353	When was the debt incurred?					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit card purchases					
4.7	Loyola Medicine	Last 4 digits of account number	\$200.00				
	Nonpriority Creditor's Name PO BOX 3021 Milwaukee, WI 53201	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Medical or Dental Services					
4.8	Northwest Medicine / Cadence	Last 4 digits of account number	Unknown				
	Nonpriority Creditor's Name c/o NCC Nationwide 815 Commerce Drive, ste 270 Oak Brook, IL 60523	When was the debt incurred? 2017					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated ☐ Disputed					
	■ Debtor 1 and Debtor 2 only						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans					
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	■ Other. Specify Medical or Dental Services					

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	Susan Charlene Royce	Case number (if know)	
4.9	Scnchrony Bank / Amazon	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name c/o Monarch recovery PO BOX 21089	When was the debt incurred?	
	Philadelphia, PA 19114  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Credit card purchases	
4.1			
0	Student Loan Servicing Center	Last 4 digits of account number	\$6,130.00
	Nonpriority Creditor's Name PO BOX 5156 Sioux Falls, SD 57117	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
		Student loan guarantee	
4.1 1	US Dept. of Education	Last 4 digits of account number 6954	\$352,061.44
	Nonpriority Creditor's Name PO BOX 5609 Greenville, TX 75403-5609	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	■ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		Parents Plus Student loan for children	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Richard Stephen Royce Debtor 2 Susan Charlene Royce		Case number (if know)
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?
Blitt & Gaines	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
661 Glenn Ave. Wheeling, IL 60090		Part 2: Creditors with Nonpriority Unsecured Claims
<u>.</u>	Last 4 digits of account number	8035

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 4,709.87
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 4,709.87
				Total Claim
	6f.	Student loans	6f.	\$ 358,191.44
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 27,800.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 385,991.44

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Fill	in this information to identify you	r case:							
Del	btor 1 Richard S	tephen Royce			_				
1	btor 2 Susan Ch	arlene Royce			_				
Uni	ited States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF ILLINOIS						
Cas	se number					Check if this	is:		
(If kr	nown)		-			☐ An ame	nded filing		
								ng postpetitior following date:	
0	fficial Form 106l					MM / DI	)/ YYYY		
S	chedule I: Your In	come							12/1
spo atta	plying correct information. If y use. If you are separated and y ch a separate sheet to this for Describe Employme	our spouse is not filing ware. On the top of any additi	ith you, do not inclu	ıde infor	mati	on about your	spouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			Debt	or 2 or non-	filing spouse	
	If you have more than one job,	Employment status	☐ Employed			☐ Er	nployed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed			■ No	t employed		
		Occupation	Retired			Reti	ed		
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include stude or homemaker, if it applies.	nt Employer's address							
		How long employed t	here?						
Par	rt 2: Give Details About M	Ionthly Income							
spou	mate monthly income as of the use unless you are separated. The use or your non-filing spouse have a space, attach a separate sheet	more than one employer, co	,				·	·	J
	, , , ,					For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	0.0	<b>0</b> \$	0.00	-
3.	Estimate and list monthly ov	ertime pay.		3.	+\$	0.0	<u> </u>	0.00	-
4.	Calculate gross Income. Add	l line 2 + line 3.		4.	\$	0.00	\$	0.00	

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	otor 1 otor 2	Richard Stephen Royce Susan Charlene Royce	-		Case	e number ( <i>if ki</i>	nown)					
					Fo	r Debtor 1			or Debto			
	Cop	py line 4 here	4.		\$_	(	0.00	\$		0.00	)	
5.	List	t all payroll deductions:										
	5a.		5a	à.	\$	(	0.00	\$		0.00	)	
	5b.	· · · · · · · · · · · · · · · · · · ·	5b		\$		0.00	\$	,	0.00		
	5c.	Voluntary contributions for retirement plans	50	<b>)</b> .	\$		0.00	\$		0.00	_	
	5d.	Required repayments of retirement fund loans	50	ı.	\$	(	0.00	\$		0.00	)	
	5e.	Insurance	5e	€.	\$	(	0.00	\$		0.00	)	
	5f.	Domestic support obligations	5f.		\$	(	0.00	\$		0.00	)	
	5g.	Union dues	<b>5</b> g	J.	\$_	(	0.00	. \$		0.00	)	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_	(	0.00	+ \$		0.00	)	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	(	0.00	\$		0.00	)	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	(	0.00	\$		0.00	<u>)</u>	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	8a		\$_		0.00	\$		0.00		
	8b. 8c.		8b	).	\$_		0.00	<b>.</b>		0.00	<u>)</u>	
		settlement, and property settlement.	80	<b>;</b> .	\$	(	0.00	\$		0.00	)	
	8d.		80	ı.	\$_	(	0.00	\$		0.00	)	
	8e.	• • • • • • • • • • • • • • • • • • • •	8e	€.	\$_	2,011	1.80	. \$	1	,745.00	)	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.		\$	(	0.00	\$	i	0.00	)	
	8g.	Pension or retirement income	8g	J.	\$	921	1.23	\$	2	2,587.37	7	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	(	0.00	+ \$		0.00	)	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	2,933	3.03	\$		4,332.3	37	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	Φ.		2,933.03	+ \$		4,332.37	= \$	7,265.	40
10.		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,933.03			4,332.37	<b>┤</b>	1,205.	FU
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe					•			0.0	00
12.		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies								\$	7,265.	40
										Comb		_
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							month	nly incom	*
		Yes. Explain:										

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						1		
FIII	in this informa	ation to identify yo	our case:					
Deb	otor 1	Richard Step	phen Roy	/ce			eck if this is:  An amended filing	
	otor 2 ouse, if filing)	Susan Charl	ene Roy	ce			ŭ	wing postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number							
Of	fficial Fo	orm 106J						
So	chedule	J: Your	Exper	ises				12/1
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this in.				
Par		ribe Your House	∌hold					
1.	Is this a joi							
			in a separ	ate household?				
	. 00. <b>□</b> N							
	-		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No □ Yes
					-			□ No
								☐ Yes
								□ No
3.	Do your ex	penses include	_	No				☐ Yes
	expenses of	f people other t d your depende	han $_{f \Box}$	Yes				
exp	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it cluded it on Schedule I: Y			Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. In or lot.	nclude first mortgage	e 4.	\$	3,287.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	100.00
			•	upkeep expenses		4c.	i ———	75.00
5		eowner's associat		dominium dues	mo oquity loops	4d.	\$ e	0.00

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Debtor 1 Debtor 2		Richard Stephen Royce Susan Charlene Royce	Case num	ber (if known)	
6.	Utiliti	ies:			
0.	6a.	Electricity, heat, natural gas	6a.	\$	250.00
	6b.	Water, sewer, garbage collection	6b.	· · · · · · · · · · · · · · · · · · ·	40.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	230.00
	6d.	Other. Specify: cable	6d.	\$	150.00
7.	Food	d and housekeeping supplies		\$	400.00
8.		dcare and children's education costs	8.	\$	0.00
9.	-	ning, laundry, and dry cleaning	9.	\$	50.00
		onal care products and services	10.	\$	0.00
		ical and dental expenses	11.	·	350.00
		sportation. Include gas, maintenance, bus or train fare.		· —	<del></del> -
		ot include car payments.	12.	\$	250.00
13.	Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Char	itable contributions and religious donations	14.	\$	50.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.		_	
		Life insurance	15a.	*	195.00
		Health insurance	15b.	·	300.00
		Vehicle insurance	15c.	·	50.00
		Other insurance. Specify:	15d.	\$	0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	•	
	•	ify: irs installment	16.	\$	200.00
17.		Illment or lease payments: Car payments for Vehicle 1	17a.	¢	E60.00
				*	560.00
		Car payments for Vehicle 2	17b.	·	0.00
		Other Specify: student loan guarantee	17c.	· · ·	150.00
40		Other. Specify:	17d.	\$	0.00
10.		payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.		r payments you make to support others who do not live with you.		\$	0.00
	Spec		19.	·	0.00
20.		r real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
		Mortgages on other property	20a.		0.00
	20b.	Real estate taxes	20b.	\$	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	21.	+\$	0.00
22.		ulate your monthly expenses			
		Add lines 4 through 21.		\$	7,229.00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	7,229.00
23	Calc	ulate your monthly net income.			
_0.		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	7,265.40
		Copy your monthly expenses from line 22c above.	23b.		7,229.00
	_00.	copy year monany expenses non-mic ==0 above.			1,223.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	36.40
				<u> </u>	
24.	For ex	ou expect an increase or decrease in your expenses within the year after yo xample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage?			e or decrease because of a
	■ No	, , ,			
		os. Lapidii noto.			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Richard Stephen	Royce			
	First Name	Middle Name	Last Name		
Debtor 2	Susan Charlene F	Royce			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case number					
(if known)					Check if this is an
					amended filing
Official Forr	m 106Dec				
Doclarat	tion About a	ın Individual I	Dahtar's Sch	adulas	40/45
Deciara	HOH ADOUL a	ili iliulviuuai i	Depioi 3 3ci	iedules	12/15
				-1 !	
ir two married p	eopie are filing together	r, both are equally respons	sible for supplying corre	ect information.	
You must file thi	is form whenever you fi	le bankruptcy schedules o	or amended schedules. I	Making a false statement, cor	ncealing property, or
obtaining mone	y or property by fraud ir	n connection with a bankru		fines up to \$250,000, or impr	
years, or both. 1	8 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	n Below				
Did you pa	ly or agree to pay some	one who is NOT an attorne	ey to help you fill out ba	nkruptcy forms?	
■ No					
□ Yes. I	Name of person			Attach Bankruntov Pe	tition Preparer's Notice,
					ature (Official Form 119)
					,
		that I have read the summ	ary and schedules filed	with this declaration and	
tnat tney ar	e true and correct.				
X			X		
Richar	rd Stephen Royce		Susan Char	lene Royce	
	re of Debtor 1		Signature of D		

Date May 16, 2017

Date May 16, 2017

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Fill	in this info	rmation to identify your	case:			
Del	otor 1	Richard Stepher	Rovce			
		First Name	Middle Name	Last Name		
	otor 2	Susan Charlene				
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States E	Sankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	se number lown)					heck if this is an mended filing
Sta	atemen			duals Filing for B	Sankruptcy equally responsible for sup	4/16
info num	rmation. If ber (if kno		attach a separate sheet to		y additional pages, write you	
Par	t 1: Give	Details About Your Ma	rital Status and Where You	ı Lived Before		
1.	What is yo	ur current marital statu	s?			
	■ Marrie					
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. I	ist all of the places you li	ved in the last 3 years. Do n	ot include where you live nov	v.	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
<b>3.</b> state					nity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. N	∕lake sure you fill out <i>Sch</i>	edule H: Your Codebtors (O	fficial Form 106H).		
D				,		
Par	t 2 Expl	ain the Sources of You	r Income			
4.	Fill in the to	otal amount of income you	received from all jobs and	ng a business during this y all businesses, including part e together, list it only once u		ndar years?
	□ No					
	Yes. F	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		ar year before that: December 31, 2015 )	■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$3,224.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 2 Susan Charlene Royce Case number (if known) Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. Describe below. each source (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Pension, Retirement Pension, Retirement \$11,728.00 \$17,328.00 the date you filed for bankruptcy: **Funds And SSI Funds And SSI Benefiits Benefiits** For last calendar year: Pension, Retirement \$35,184.00 Pension, Retirement \$51,984.00 (January 1 to December 31, 2016) **Funds And SSI Funds And SSI Benefiits Benefiits** For the calendar year before that: Pension, Retirement Pension, Retirement \$35,184.00 \$51,984.00 (January 1 to December 31, 2015) **Funds And SSI Funds And SSI Benefiits Benefiits** Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☐ Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Debtor 1

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Debtor Debtor		Document	Cas	e number (if known)		
	sider? clude payments on debts guaranteed or cos	signed by an insider.				
•	No					
	Yes. List all payments to an insider	Dates of payment	Total amount paid	Amount you still owe	Reason for the	
Part 4	Identify Legal Actions, Repossession	ns, and Foreclosures				
Lis	ithin 1 year before you filed for bankrupt st all such matters, including personal injury odifications, and contract disputes.					
□	l No l Yes. Fill in the details.					
_	Case title	Nature of the case	Court or agency		Status of the	case
D	Discover Bank v. Richard Royce 6 AR 298	Collection	Circuit Court of	Kane	■ Pending	
			100 S. 3rd Stree Geneva, IL 6013		☐ On appeal ☐ Concluded	
		Describe the Brownsty		Data		Value of the
C	reditor Name and Address	Describe the Property  Explain what happene	al .	Date		Value of the property
	ithin 90 days before you filed for bankru counts or refuse to make a payment bed No 1 Yes. Fill in the details.	ptcy, did any creditor, inc		ancial institution	n, set off any am	ounts from your
С	reditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
	ithin 1 year before you filed for bankrupt ourt-appointed receiver, a custodian, or a No Yes		erty in the possessi	on of an assigne	e for the benefi	t of creditors, a
Part 5	List Certain Gifts and Contributions					
_	110	otcy, did you give any gift	s with a total value	of more than \$60	0 per person?	
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 ler person	Describe the gifts		Dates the g	s you gave ifts	Value
P	Person to Whom You Gave the Gift and					

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Richard Stephen Royce

Deb	btor 2 Susan Charlene Royce		(	Case number (	if known)	
14.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or			ns with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.	total	Describe what you contributed		Dates you contributed	Value
Par	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankr or gambling?	uptcy or	since you filed for bankruptcy, did y	you lose anyt	hing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lost the amount that insurance has paid. Lost claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost
Par	rt 7: List Certain Payments or Transfe	rs				
16.	Within 1 year before you filed for bankructonsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No	preparii	ng a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.  Person Who Was Paid		Description and value of any prop	ortv	Date navment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You		transferred	Date payment or transfer was made	payment	
	John S. Biallas, Attorney At Law 3N918 Sunrise lane St. Charles, IL 60174 jsb70@comcast.net		Attorney Fees		11/2016	\$2,500.00
17.	Within 1 year before you filed for bankri promised to help you deal with your cre Do not include any payment or transfer that	editors o	r to make payments to your creditor		r transfer any prope	rty to anyone who
	No					
	Yes. Fill in the details.  Person Who Was Paid		Description and value of any prop	artv	Date payment	Amount of
	Address		transferred	er ty	or transfer was made	payment
18.	transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all	ur busin rs made a	ess or financial affairs? as security (such as the granting of a s			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you			F & OX	9-	

Debtor 1

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Debtor 1 Richard Stephen Royce
Debtor 2 Susan Charlene Royce

Case number (if known)

19.	beneficiary? (These are often called asset-protect		y property to a	sen-settle	a trust or similar device o	or which you are a			
	☐ Yes. Fill in the details.								
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made			
Pai	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and St	orage Unit	s				
20	Within 1 year before you filed for bankruptcy, v	wore any financial ac-	counts or instr	umonte ho	ld in your name, or for ye	our banafit alasad			
20.	sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associate	ther financial accour	nts; certificates	of deposi		, ,			
	No								
	Yes. Fill in the details.								
		ast 4 digits of ccount number	Type of accoinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ny safe de <sub>l</sub>	oosit box or other deposi	tory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have you stored property in a storage unit or p	ĺ	home within 1	year befor	e you filed for bankruptc	y?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?			
Pai	t 9: Identify Property You Hold or Control for	r Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ıde any proper	ty you bor	rowed from, are storing fo	or, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value			
Pai	t 10: Give Details About Environmental Inform	nation							
For	the purpose of Part 10, the following definitions	s apply:							
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Richard Stephen Royce
Debtor 2 Susan Charlene Royce

Case number (if known)

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	_									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envir	onmental law? Include settlements a	and orders.						
	■ No □ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Par	11: Give Details About Your Business or Co	onnections to Any Business								
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have any	of the following connections to any	business?						
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	☐ An officer, director, or managing exec	utive of a corporation								
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation								
	■ No. None of the above applies. Go to Par	rt 12.								
	Yes. Check all that apply above and fill in	the details below for each business.								
	Business Name D Address	Describe the nature of the business	Employer Identification number Do not include Social Security							
		lame of accountant or bookkeeper	Dates business existed							
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statement to	o anyone about your business? Inclu	ide all financial						
	■ No □ Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued								

Entered 05/16/17 17:10:48 Document Page 37 of 41 **Richard Stephen Royce** Debtor 2 Susan Charlene Royce Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Susan Charlene Royce **Richard Stephen Royce** Signature of Debtor 1 Signature of Debtor 2 Date May 16, 2017 Date May 16, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Filed 05/16/17

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

☐ Yes

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Desc Main

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Fill in this inform	mation to identify your	case:		
Debtor 1	Richard Stephen	Royce		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Susan Charlene F	Royce Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
			viduals Filing Under Chapt	er 7 12/15
	e claims secured by yo		out this form it.	
you have leas You must file thi	sed personal property a s form with the court w ever is earlier, unless th	nd the lease has n ithin 30 days after	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to th	
	eople are filing together nd date the form.	in a joint case, bo	th are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possib our name and case nun		s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
1. For any credit	•	art 1 of Schedule D	: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
Identify the cre	editor and the property the	nat is collateral	What do you intend to do with the property that secures a debt?	nt Did you claim the property as exempt on Schedule C?
Creditor's N	lationstar Mortgage		☐ Surrender the property.	□ No
name:	ationstal mortgage		Retain the property and redeem it.	□ 140
Description of	3N226 Loblolly Lar	ne Saint	Retain the property and redeem it.  Retain the property and enter into a  Reaffirmation Agreement.	Yes
property securing debt:	Charles, IL 60175		☐ Retain the property and [explain]:	
For any unexpire in the informatio You may assume	n below. Do not list rea e an unexpired persona	ase that you listed I estate leases. Un I property lease if	in Schedule G: Executory Contracts and Unexpirexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name: Description of lea	ased			□ No
Property:				☐ Yes
Lessor's name: Description of lea	ased			□ No
Property:				☐ Yes
Lessor's name:				
Official Form 108		Statement of In	tention for Individuals Filing Under Chapter 7	page 1

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Debto Debto		Richard Stephen Royce Susan Charlene Royce	Case number (if kno	own)		
Description of leased Property:				□ No		
		ne: of leased		□ No □ Yes		
		ne: of leased		□ No □ Yes		
Lessor's name: Description of leased Property:				□ No □ Yes		
Lessor's name: Description of leased Property:				□ No □ Yes		
	penalt	gn Below ty of perjury, I declare that I have indica t is subject to an unexpired lease.	ated my intention about any property of my estate that	t secures a debt and any personal		
	Richard Stephen Royce Signature of Debtor 1		Susan Charlene Royce Signature of Debtor 2	Susan Charlene Royce		
	Date	May 16, 2017	Date May 16, 2017			

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B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	Richard Stephen Royce  Susan Charlene Royce		Case No.					
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR D	EBTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	2,500.00				
	Prior to the filing of this statement I have received		\$	2,500.00				
	Balance Due		\$	0.00				
2.	\$335.00 of the filing fee has been paid.							
3. 7	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
5.	■ I have not agreed to share the above-disclosed compens	sation with any other person	unless they are men	nbers and associates of	my law firm.			
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				w firm. A			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, statem</li> <li>c. Representation of the debtor at the meeting of creditors</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to red reaffirmation agreements and applications</li> <li>522(f)(2)(A) for avoidance of liens on house</li> </ul>	ent of affairs and plan which and confirmation hearing, and luce to market value; exc as needed; preparation	n may be required; and any adjourned he emption planning	arings thereof; ; preparation and fi	ling of			
7.	By agreement with the debtor(s), the above-disclosed fee de Representation of the debtors in any disch any other adversary proceeding.			es, relief from stay	actions or			
	(	CERTIFICATION						
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement for	payment to me for	representation of the de	ebtor(s) in			
ı	May 16, 2017							
	Date	John S. Biallas 0 Signature of Attorne John S. Biallas, A 3N918 Sunrise la St. Charles, IL 60	Attorney At Law ne 174					
		630-513-7878 Fa jsb70@comcast.						
		Name of law firm			<del></del>			

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### RETAINER AND BILLING AGREEMENT FOR PROFESSIONAL SERVICES RENDERED IN A PERSONAL CHAPTER 7 BANKRUPTCY

The undersigned hereby agree(s) to retain John S. Biallas, Attorney at Law of St. Charles, Illinois as Bankruptcy Counsel and to pay the following retainer / fee credit and costs for the filing of a Chapter 7 Bankruptcy Proceeding, with such sums due before the case shall be filed, or according to such terms and conditions agreed to by the parties in advance:

Total Fee (not including costs): \$\, 2,500.00 \\

Cost Deposit \$\, 335.00 \\

Amount Due prior to filing: \$\, 2835.00 \\

John S. Biallas agrees to represent the client in the Bankruptcy proceeding and to appear at all necessary hearings and proceedings required to accomplish this end. The Clients acknowledge that necessary continuances of some of these proceedings may be needed to facilitate scheduling of these matters so as to resolve conflicts in scheduling.

All fees shall be subject to the approval of the Bankruptcy Court under the provisions of the United States Bankruptcy Code.

The fees and costs set out above are due in advance prior to any work being performed. Once work on the schedules to be filed in the case is completed, whether or not the case is filed, ½ of the Total Fee shall be deemed earned by John S. Biallas. Once the case is filed with the US Bankruptcy Court the balance of the fees, are also deemed earned. The client may request a refund of any un-earned fees or unexpended cost deposit prior to either event.

If any Adversary Proceedings or other supplemental cases are filed in this Bankruptcy proceeding either by or against the Client(s) with regard to the issue of the dischargeability of any debt(s), the Client(s) agree to pay an additional trial retainer of \$2,500.00, payable prior to the filing of the initial pleading or the appearance required in that proceeding. All Legal services in these supplemental proceedings shall be billed at the rate of \$450.00 per hour. Invoices for these charges shall be billed to the client for prompt payment on a monthly basis.

If these monthly billings are not paid, it is understood that John S. Biallas will be free to withdraw from any proceeding, with the permission of the Court.

AGREED:

Agreed by Client(s):-

Printed name:

D-4-4.

Printed name:

1 - . .

JOHN S. BIALLAS 3 N 918 Sunrise Lane

St. Charles, Ill 60174

\$30-513-7878